

# *Deputy Sheriff Booklet 9*

## Glossary

Although these benefit descriptions include certain key features and brief summaries of King County deputy sheriff benefit plans, they are not detailed descriptions. If you have questions about specific plan details, contact the plan or Benefits and Retirement Operations. We've made every attempt to ensure the accuracy of this information. However, if there is any discrepancy between the benefit descriptions and the insurance contracts or other legal documents, the legal documents will always govern. King County intends to continue benefit plans indefinitely, but reserves the right to amend or terminate them at any time in whole or in part, for any reason, according to the amendment and termination procedures described in the legal documents. King County, as plan administrator, has the sole discretionary authority to determine eligibility for benefits and to construe the terms of the plans. This information does not create a contract of employment between King County and any employee.

Call 206-684-1556 for alternate formats.



## Glossary

**Accident.** A sudden and unforeseen event that occurs at a specific time and place and results in bodily injury. It is independent of illness other than infection of a cut or wound received in an accident.

**Aetna.** The organization contracted by King County to administer the life insurance plan.

**Allowable Amount – WDS.** The maximum dollar amount allowed toward reimbursement for any service provided for a covered dental benefit.

**Allowed Amount – Regence.** The amount Regence BlueShield pays for a service or supply. Inside the Regence BlueShield service area, the amount is determined by agreement between Regence BlueShield and its participating providers. Outside the service area, the amount is determined at Regence BlueShield's option, either by the local Blue Shield/Blue Cross plan or an independent entity. If you see a non-participating provider and the provider charges more than the allowed amount, you pay the difference (your share of the total cost is higher).

**Alveolar.** Pertaining to the ridge, crest or process of bone that projects from the upper and lower jaw and supports the roots of the teeth.

**Amalgam.** A mostly silver filling often used to restore decayed teeth.

**Annual Deductible.** The amount plan participants pay each plan year before a plan pays benefits. The annual deductible does not apply to any out-of-pocket maximums.

**Apicoectomy/Root Tip Amputation.** Excision of the apical portion of a tooth's root to gain access to the periapical area to remove diseased tissue.

**Associated Administrators Inc. (AAI).** The organization contracted by King County to administer flexible spending accounts, COBRA benefits and retiree benefits.

**Beneficiary.** The person or organization you designate to receive any life or AD&D insurance benefits payable at the time of your death.

**Bitewing X-ray.** An x-ray that simultaneously shows the top visible part of the upper and lower molar teeth as well as part of their roots and supporting structures.

**Brand-Name Drugs.** Trademark drugs patented for a limited period by a single pharmaceutical company.

**Bridge.** Replacement for a missing tooth or teeth, consisting of the artificial tooth (pontic) and attachments to the adjoining abutment teeth (retainers). Bridges are cemented in place and are not removable.

**Caries.** Decay – a disease process initiated by bacterially produced acids on the tooth surface.

**Caries Susceptibility Test.** A test to determine how likely a person is to develop tooth decay, usually by measuring the concentration of certain bacteria in the mouth.

**Chemical Dependency.** A psychological and/or physical dependence on alcohol or a state-controlled substance. The pattern of use must be so frequent or intense that the user loses self-control over the amount and circumstances of use, develops symptoms of tolerance and, if use is reduced or discontinued, shows symptoms of physical and/or psychological withdrawal. The result is that health is substantially impaired or endangered, or social or economic function is substantially disrupted.

**Chiropractic Care.** Manipulation of the spine or extremities to correct a subluxation (incomplete or partial dislocation) identified on an x-ray. The subluxation must be consistent with the patient's neuromusculoskeletal symptoms, and treatment must be within the limits of a specific documented treatment plan. Services must be

provided by a state-licensed chiropractor or osteopath (chiropractors are restricted by law to manipulation of the spine; osteopaths are licensed to perform manipulative therapy on all parts of the body).

**CIGNA.** The organization contracted by King County to provide AD&D benefits.

**COBRA.** Consolidated Omnibus Budget Reconciliation Act. Implemented in 1986, COBRA allows continuation of health coverage on a self-paid basis under certain circumstances for a limited time. King County offers all required COBRA rights and extends spouse rights to domestic partners.

**Coinsurance.** The amount a patient and a patient's plan share toward covered expenses after any annual deductible is met.

**Cole Vision.** An organization contracted by PacifiCare to provide participants vision benefits and services.

**Composite.** A tooth-colored filling, made of a combination of materials, used to restore teeth.

**Comprehensive Oral Evaluation.** Typically used by a general dentist/specialist, it is a thorough evaluation and recording of the extraoral and intraoral hard and soft tissues.

**Contracted Professional/Contracted Specialist – Group Health.** A network provider under the Group Health plan who is under contract to Group Health.

**Controlled Substance 5.** A federal legend drug that comes under the jurisdiction of the Controlled Substances Act. These medications consist of preparations containing limited quantities of certain narcotic drugs generally for antitussive (cough preparations) and antidiarrheal purposes. Examples include Robitussin A-C syrup and Naldecon-CX.

**Copay.** The fixed amount the patient pays at the time the covered service is received.

**Covered Accident – AD&D.** An event that causes bodily injuries while covered by the AD&D insurance plan. The bodily injury must directly result in a covered loss.

**Crown.** A restoration that replaces the entire surface of the tooth's visible portion.

**Custodial or Convalescent Care.** Care primarily to assist the patient in activities of daily living, including inpatient care mainly to support self-care and provide room and board. Examples are helping the participant to walk, get in and out of bed, bathe, dress, eat or prepare special diets or take medication that is normally self-administered.

**Dental Care.** Care of, or related to, the mouth, gums, teeth, mouth tissues, upper or lower jaw bones or attached muscle, upper or lower jaw augmentation or reduction procedures, orthodontic appliances, dentures and any care generally recognized as dental. This also includes related supplies and devices (but not prescription drugs).

**Denture.** A removable prosthesis that replaces missing teeth. A complete (full) denture replaces all upper or lower teeth; a partial denture replaces one to several missing upper or lower teeth.

**DESI Drugs.** Drugs that lack substantial evidence of effectiveness according to the FDA, but since they have been used and accepted for many years without significant safety problems, they continue to be used today. Examples include Donnatal, Librax and Tigan suppositories.

**Disability – Life.** You are considered permanently and totally disabled only if disease or injury stops you from working at your own job or any other job for pay or profit, and it must continue to stop you from working at any reasonable job. A "reasonable job" is defined as any job for pay or profit that you are (or may reasonably become) fitted for by education, training or experience.

**Durable Medical Equipment.** Mechanical equipment that can stand repeated use and multiple users, is primarily and customarily used to serve a medical purpose, is generally not useful to a person in the absence of illness or injury and is prescribed by a physician.

**Emergency – Medical.** A medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the person experiencing the condition, as a prudent layperson, might reasonably expect any of the following to result if immediate medical attention is not provided:

- Immediate harm to self/others and health put in serious jeopardy (mental health medical emergency)
- Serious impairment to his/her bodily functions
- Serious dysfunction of any bodily organ or part
- Active labor, meaning labor at a time that either of the following would occur:
  - There is inadequate time to effect a safe transfer to another hospital prior to delivery or
  - A transfer poses a threat to the health and safety of the mother or unborn child.

In a mental health medical emergency, a prudent layperson might also reasonably expect serious immediate harm to self/others to result if immediate medical attention is not provided.

**Emergency Services.** Medical screening, examination and evaluation by a provider or other personnel (to the extent provided by law) to determine if a medical emergency or psychiatric medical emergency exists. If this condition exists, emergency services include the care, treatment and/or surgery by a provider necessary to relieve or eliminate the medical emergency or psychiatric medical emergency within the capabilities of the facility.

**Endodontics.** The diagnosis and treatment of dental diseases, including root canal treatment, affecting dental nerves and blood vessels.

**Evidence of Insurability (EOI).** Any statement or proof of a person's physical condition, occupation or other factor affecting acceptance for insurance.

**Exclusions.** Services or supplies not covered under a plan.

**Experimental or Investigational Services/Supplies.** A treatment, procedure, facility, equipment, drug, drug usage, medical device or supply is considered experimental or investigational when it meets any of the following criteria at the time it is or will be provided to the plan participant:

- Cannot be legally marketed in the United States without the approval of the Food and Drug Administration (FDA) and such approval has not been granted
- Is the subject of a current new drug or new device application on file with the FDA
- Is provided as part of a Phase I or Phase II clinical trial, as the experimental or research arm of a Phase III clinical trial or in any other manner intended to evaluate the service's or supply's safety, toxicity or efficacy
- Is provided under written protocol or other document that lists an evaluation of the service's or supply's safety, toxicity or efficacy among its objectives
- Is under continued scientific testing and research concerning safety, toxicity or efficacy
- Is provided under informed consent documents that describe the service or supply as experimental or investigational, or in other terms that indicate it is being evaluated for safety, toxicity or efficacy
- The prevailing opinion among experts as expressed in the published authoritative medical or scientific literature is that:
  - Use should be substantially confined to research settings or
  - Further research is necessary to determine safety, toxicity or efficacy.

In determining whether a service or supply is experimental or investigational, the following sources of information are relied upon exclusively:

- The plan participant's medical records
- Written protocol(s) or other document(s) under which the service or supply has been or will be provided
- Any consent documents(s) the plan participant or plan participant's representative has executed or will be asked to execute to receive the service or supply
- The files and records of the Institutional Review Board (IRB) or similar body that approves or reviews research at the institution where the service or supply has been or will be provided, and other information concerning the authority or actions of the IRB or similar body

- The published authoritative medical or scientific literature regarding the service or supply, as applied to the plan participant's illness or injury
- Regulations, records, applications and any other documents or actions issued by, filed with or taken by the FDA, the Office of Technology Assessment or other agencies within the United States Department of Health and Human Services, or any state agency performing similar functions.

If two or more services or supplies are part of the same treatment plan or diagnosis, all are excluded if one is experimental or investigational. The plans consult the appropriate professional staff and then use the previously specified criteria to decide if a particular service or supply is experimental or investigational.

For Regence BlueShield participants, a service or supply must be classified as experimental or investigational by the national Blue Cross Blue Shield Association.

**Filled Resin.** Tooth-colored plastic materials that contain glass-like particles to add strength and resistance to wear.

**Fluoride.** A substance that when topically applied or added to drinking water is effective in resisting tooth decay.

**Fluoride Varnish.** Fluoride treatment in a varnish base applied to reduce acid damage from bacteria that cause tooth decay.

**FMLA.** Family and Medical Leave Act. Implemented in 1993, FMLA allows up to 12 weeks of unpaid, job-protected leave for certain family and medical reasons if eligibility requirements are met.

**Formulary.** A list of selected generic and brand-name prescription drugs established, reviewed and routinely updated by health plans.

**General Anesthesia.** A drug or gas that produces unconsciousness and insensibility to pain.

**Generic Drugs.** Medications that are not trademark drugs, but are chemically equivalent to the brand-name drug.

**Gingival Curettage.** The process of removing or cutting diseased soft tissue surrounding the tooth.

**Group Health.** Group Health Cooperative. The organization contracted by King County to provide the HMO medical plan option.

**HIPAA.** Health Insurance Portability and Accountability Act. Effective in 1996, HIPAA restricts the extent to which group health plans may impose preexisting condition limits and protects plan participants' personal health information.

**Hospice.** A private or public agency or organization with a hospice agency license that administers or provides hospice care.

**Hospital.** An institution licensed by the state and – for compensation on behalf of patients and on an inpatient basis – primarily engaged in providing diagnostic and therapeutic facilities for surgical and/or medical diagnosis as well as treatment and care of injured or ill persons by or under the supervision of a staff of physicians. The institution also continuously provides 24-hour nursing service by or under the supervision of registered nurses, or is any other licensed institution with which the medical plans have an agreement to provide hospital services. (Skilled nursing facilities, nursing homes, convalescent homes, custodial homes, health resorts, hospices or places for rest, the aged or the treatment of pulmonary tuberculosis are not hospitals.)

**Iliac Crest.** Top of the hip bone used for grafting bone onto the lower jaw.

**Implant.** A graft or insert set firmly onto or deeply into the alveolar area prepared for its insertion. It may support a crown or crowns, a bridge abutment, a partial denture or a complete denture.

**Inlay.** A dental filling shaped to the form of a cavity and then inserted and secured with cement.

**Inpatient Services.** Care provided to a patient who is hospitalized.

**Intravenous Sedation.** A form of sedation where the patient experiences a lowered level of consciousness but is still awake and can respond.

**KCFML.** King County Family and Medical Leave. Passed by King County Ordinance 13377 in 1998 and adopted by most but not all labor unions representing King County employees. Allows up to 18 weeks of unpaid, job-protected leave for certain family and medical reasons if eligibility requirements are met.

**Legend Prescription Drugs.** FDA-approved drugs that require a prescription from an authorized prescriber.

**Lifetime Maximum.** The maximum benefit amount a plan participant may receive from a plan in his or her lifetime.

**Limitations.** Restricting conditions, such as age, time covered and waiting periods.

**Localized Delivery of Therapeutic Agents.** Treating isolated areas of advanced gum disease by placing antibiotics or other germ-killing drugs into the gum pocket.

**Medically Necessary.** Health care services, supplies, treatments or settings considered appropriate and necessary, according to generally accepted principles of good medical practice, to diagnose or treat a medical condition. Services, supplies, treatments or settings must meet all of these requirements:

- Are not solely for the convenience of the patient, his or her family or the provider of the services or supplies
- Are the most appropriate level of service or supply that can be safely provided to the patient
- Are for the diagnosis or treatment of an actual or existing illness or injury unless being provided for preventive services
- Are not for recreational, life-enhancing, relaxation or palliative therapy (except to treat terminal conditions)
- Are not primarily for research and data accumulation
- Are appropriate and consistent with the diagnosis and, in accordance with accepted medical standards in Washington State, could not have been omitted without adversely affecting the patient's condition or the quality of health services rendered
- As to inpatient care, could not have been received in a provider's office, the outpatient department of a hospital or a non-residential facility without affecting the patient's condition or quality of health services
- Are not experimental or investigational.

The plan participant is responsible for the cost of services and supplies that are not medically necessary.

The plans reserve the right to determine whether a service, supply, treatment or setting is medically necessary. The fact a physician or other provider has prescribed, ordered, recommended or approved a service, supply, treatment or setting does not, in itself, make it medically necessary.

**Mental Condition.** A condition classified as such by the most current edition of the Diagnostic and Statistical Manual of Mental Disorders.

**Mental Disorder.** Any mental, emotional, behavioral, psychological, personality, cognitive, mood or stress-related abnormality, disorder, disturbance, dysfunction or syndrome, regardless of cause, including any biological or biochemical disorder or imbalance of the brain. Mental disorder includes, but is not limited to, bipolar affective disorder, organic brain syndrome, schizophrenia, psychotic illness, manic depressive illness, depression and depressive disorders, anxiety and anxiety disorders.

**Mutual Aid Agreement.** Allows certain benefits to continue while you're away from the county if you are needed to work temporarily for another agency.

**National Preferred Transplant Network -- PacifiCare.** A network of transplant facilities that are:

- Licensed in the state where they operate
- Certified by Medicare as a transplant facility for a specific organ transplant
- Designated by PacifiCare as a transplant facility for a specific organ program

- Able to meet reasonable access standards for organ transplants based on Regional Organ Procurement Agency statistics for the facility's location (a Regional Organ Procurement Agency is the geographic area designated by a state-licensed organ procurement organization for transplants in the State of Washington).

**Network Benefits.** The level of benefits you receive when you see a network provider. Network benefits are generally higher than non-network benefits.

**Network Provider.** A person, group, organization or facility under contract with a benefit plan to furnish covered services to plan participants.

**Nightguard.** See "Occlusal Guard."

**Non-Network Benefits.** The level of benefits you receive when you see a non-network provider.

**Non-Network Provider.** A person, group, organization or facility not under contract with a plan to furnish covered services to plan participants. Though some benefit plans allow use of non-network providers, they still must be licensed, registered or certified to provide covered services by the state where they operate.

**Non-Formulary Prescription Drug – Regence BlueShield.** A prescription drug not listed on a formulary.

**Non-Preferred Brand – Group Health and PacifiCare.** Brand-name prescription drugs not preferred by a medical plan because they are considered no more effective but cost more than preferred brands.

**Occlusal Adjustment.** Modification of the occluding surfaces of opposing teeth to develop harmonious relationships between the teeth and neuromuscular mechanism, the temporomandibular joints and the structure supporting the teeth.

**Occlusal Guard.** A removable dental appliance, sometimes called a nightguard, to minimize the effects of grinding or gnashing the teeth.

**Occlusal Splint.** A device used to support, protect or immobilize oral structures that have been loosened, replanted, fractured or traumatized; also refers to devices used in the treatment of TMJ disorders.

**Occlusion.** The contact of the teeth of both jaws when closed or during the movements of the mandible in mastication (chewing).

**Onlay.** Restoration of the entire contact surface of the tooth.

**Open Enrollment.** The annual period when benefit-eligible employees may change plans, add life insurance coverage and add family members for coverage – within the limits of each benefit plan.

**Orthodontic Treatment.** The necessary procedures of treatment, performed by a licensed dentist, involving surgical or appliance therapy for movement of teeth and post-treatment retention.

**Orthognathic Surgery.** Surgical treatment to correct malpositions of the upper jaw bone (maxilla) and/or lower jaw bone (mandible).

**Outpatient Services.** Care provided to a patient who is not hospitalized, but who receives treatment at a licensed medical facility.

**Overdenture.** A removable denture constructed over existing natural teeth or implanted studs.

**PacifiCare.** An organization contracted by King County to provide one of the deputy sheriff medical/vision plan options.

**Panorex X-ray.** An x-ray system using two points of rotation to obtain a panoramic view of the dental arches.



**Periodic Oral Evaluation/Routine Exam.** An evaluation performed on a patient to determine any changes in dental and medical health status following a previous comprehensive or periodic evaluation.

**Periodontics.** Diagnosis, prevention and treatment of diseases in gums and the bone that supports teeth.

**Plan Year.** The calendar year (January 1 through December 31).

**Physical Disease.** A physical disease entity or process that produces structural or functional changes in your body as diagnosed by a physician.

**Physician.** A provider licensed by the state in where he or she practices as:

- Chiropractor
- Dentist (DDS or DMD)
- Doctor of medicine or surgery
- Doctor of naturopathic medicine
- Doctor of osteopathy
- Doctor of ophthalmology
- Doctor of podiatry
- Psychologist (if licensed by the state to practice psychology and in private practice)
- Registered nurse.

The medical/vision plans also cover providers licensed as a physician's or osteopath's assistant, certified as a nursing assistant or licensed as a practical nurse or registered nurse's assistant, when that provider works with or is supervised by one of the above physicians.

**Plaque.** Flat masses of bacteria and debris on tooth surfaces.

**Preauthorization/Preadmission – Medical.** The medical plans' approval for services or supplies given before the patient receives them.

**Predetermination – Dental.** The dental plan's approval for services or supplies given before the patient receives them.

**Preferred Brand.** Brand-name prescription drugs preferred by a medical plan because of their clinical and economic value to the plan and participants. They're considered equally as effective but cost less than non-preferred brands.

**Prescription Drug.** Inside the United States, any medical substance approved by the FDA that requires a prescription, must be dispensed by a licensed pharmacist and, under the Federal Food, Drug and Cosmetic Act (as amended), must be labeled "Caution: Federal law prohibits dispensing without a prescription." Outside the United States, any drug equivalent.

**Primary Care Physician (PCP).** A physician who provides or coordinates care for plan participants.

**Prophylaxis.** The control of dental and oral diseases by preventive measures, especially the mechanical cleansing of the teeth.

**Prosthesis.** An artificial substitute to replace a missing natural body part.

**Prosthodontics.** The branch of dentistry that deals with the replacement of missing teeth or oral tissues by artificial means, such as bridges, dentures or implants.

**Provider.** A person, group, organization or facility licensed to provide plan services, equipment, supplies or drugs. For the medical/vision plans, this includes but is not limited to naturopaths, acupuncturists and massage therapists. The provider must be practicing within the scope of his or her license.

**Pulp Exposure Treatment (Pulp Capping).** The covering of an exposed dental pulp with a material that protects it from external influences and does not interfere with pulpal healing. It stimulates the formation of secondary dentin in an effort to maintain the health and vitality of the tooth's pulp.

**Pulpotomy.** An operation by which the bulbous or crown portion of the dental pulp is removed.

**Qualified Medical Child Support Order (QMCSO).** A decree, judgment or order from a state court (including approval of a settlement agreement) or administrative order that requires benefit plans to include a child in the employee's coverage and make any applicable payroll deductions.

**Rebase.** A process of refitting a denture by replacing the denture base material without changing the occlusal relationships of the teeth.

**Regence BlueShield.** An organization contracted by King County to provide one of the deputy sheriff medical/vision plan options.

**Reline.** To resurface the tissue side of a denture with a new base material so it will fit more accurately.

**Respite Care.** Time off or a break for someone who is the main caregiver for an aged, ill or disabled adult or child.

**Restorative.** A process used to replace a lost tooth or part, or the diseased portion of one, by artificial means as with a filling, crown, inlay or onlay to restore proper dental function.

**Root Planing.** A procedure done to smooth roughened root surfaces.

**Salary.** Your annual base pay excluding overtime, bonuses, premium pay or any other special pay.

**Sealants.** A resinous material designed for application to the surfaces of posterior teeth to seal surface irregularities and prevent tooth decay.

**Service Area.** The geographic area where the plans have arranged for covered services through agreements with various providers.

**Skilled Nursing Facility.** A facility that provides room and board as well as skilled nursing care 24 hours a day and is accredited as an extended care facility or is Medicare certified as a skilled nursing facility. It is not a hotel, motel or place for rest or domiciliary care for the aged.

**Specialist – Washington Dental Service.** A licensed dentist who has successfully completed an education program accredited by the Commission of Dental Accreditation, two or more years in length, as specified by the Council on Dental Education or by diplomats of an American Dental Association-recognized certifying board.

**Staff Member/Staff Specialist – Group Health.** A network provider under the Group Health plan who is part of the Group Health staff.

**Temporomandibular Joint (TMJ) Disorders.** Disorders with any of the following characteristics:

- Pain in the musculature associated with the TMJ
- Internal derangements of the TMJ
- Arthritic problems with the TMJ
- Abnormal range of motion or limited range of motion of the TMJ.

(The temporomandibular joint just ahead of the ear connects the mandible, or jawbone, to the temporal bone of the skull.)

**Urgent Care.** Medical services that do not constitute a medical emergency but need immediate medical attention.

**USERRA.** The Uniformed Services Employment and Reemployment Rights Act of 1994.

**Usual, Customary and Reasonable Charge (UCR) – Medical.** Rates consistent with those normally charged by the provider for the same services or supplies and within the general range of charges by other providers in the same area for the same services or supplies.

**Washington Dental Service (WDS).** The organization contracted by King County to administer dental plan benefits.

**Women’s Health Care Services.** These include the following health care services:

- Maternity care
- Reproductive health services
- Gynecological care
- General exams and preventive care.



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# Resource Directory

If no TTY phone number is listed, please call 711 to access the TTY Relay Service.

| For Questions About ...  | Contact ...   |
|--|---|
| <b>Accidental Death and Dismemberment (AD&amp;D) Insurance</b> <ul style="list-style-type: none"> <li>Conversion option</li> <li>Secure travel services</li> <li>For claims, contact Benefits and Retirement Operations</li> </ul>   | <b>CIGNA</b><br>Phone 1-800-441-1832 (conversion) ■ 1-800-336-2485 (TTY)<br><b>Worldwide Assistance Services Inc. (secure travel services)</b><br>Phone 1-888-226-4567/1832 (US/Canada) ■<br>Call collect 202-331-7635 (all other locations)<br>Fax 202-331-1528<br>Email <a href="mailto:cigna@worldwideassistance.com">cigna@worldwideassistance.com</a>                                    |
| <b>Benefits – Eligibility and New Hire Enrollment</b>  | <b>Sheriff's Office Personnel Unit</b><br>KC Courthouse KCC-SO-0100, 516 Third Ave., Seattle WA 98104-1598<br>Phone 206-205-7601/2/4<br>Fax 206-205-7608  |
| <b>Benefits – General</b> <ul style="list-style-type: none"> <li>Open enrollment and making changes</li> <li>Flexible Spending Account enrollment</li> <li>Life and AD&amp;D insurance details</li> <li>Alternate formats</li> </ul> | <b>Benefits and Retirement Operations</b><br>Exchange Building EXC-ES-0300, 821 Second Ave., Seattle WA 98104-1598<br>Phone 206-684-1556 ■ 1-800-325-6165 x41556 (outside local calling area)<br>Fax 206-684-1925<br>Email <a href="mailto:kc.benefits@metrokc.gov">kc.benefits@metrokc.gov</a><br>Web <a href="http://www.metrokc.gov/finance/benefits">www.metrokc.gov/finance/benefits</a> |
| <b>COBRA and Retiree Benefits</b>  | <b>Associated Administrators Inc. (AAI)</b><br>PO Box 3988, Portland OR 97208-3988<br>Phone 1-800-320-2915 ■ 1-800-428-4833 (TTY)<br>Fax 503-979-8987<br>Email <a href="mailto:cobra@aai-tpa.com">cobra@aai-tpa.com</a>   |
| <b>Counseling and Resource Referral</b> <ul style="list-style-type: none"> <li>Personal, family and work problems</li> <li>Financial and legal matters</li> <li>Child care, elder/adult care</li> </ul>                              | <b>Making Life Easier Program (24 hours a day, 7 days a week)</b><br>Phone 1-888-874-7290   |
| <b>Deferred Compensation</b> <ul style="list-style-type: none"> <li>Enrollment</li> <li>Changes (beneficiaries, contributions, allocations, etc.)</li> <li>Quarterly worksite seminars</li> </ul>                                    | <b>T. Rowe Price</b><br>PO Box 17215, Baltimore MD 21297-1215<br>Phone 1-888-457-5770<br>Web <a href="http://rps.troweprice.com/kingcounty/retirementplan/index.html">http://rps.troweprice.com/kingcounty/retirementplan/index.html</a>  |
| <b>Dental</b> <ul style="list-style-type: none"> <li>Providers</li> <li>Claims and appeals</li> <li>Other plan details</li> </ul>  | <b>Washington Dental Service (WDS)</b><br>PO Box 75688, Seattle WA 98125-0688<br>Phone 206-522-2300 ■ 1-800-554-1907<br>Fax 206-285-4926<br>Email <a href="mailto:cservice@deltadentalwa.com">cservice@deltadentalwa.com</a><br>Web <a href="http://www.DeltaDentalWA.com">www.DeltaDentalWA.com</a>  |
| <b>Disability Services</b> <ul style="list-style-type: none"> <li>Essential job function assessment</li> <li>Job modification</li> </ul>   | <b>Disability Services Program</b><br>Yesler Building YES-HR-0540<br>400 Yesler Way, Seattle WA 98104-2683<br>Phone 206-263-4507 ■ 1-800-325-6165 x44507 (outside local calling area)<br>Fax 206-684-2017<br>Intranet <a href="http://ohrm.metrokc.gov/safety/DAProgram/da.htm">ohrm.metrokc.gov/safety/DAProgram/da.htm</a>  |

| For Questions About ...  | Contact ...  |
|--|--|
| <b>Flexible Spending Accounts (FSAs)</b> <ul style="list-style-type: none"> <li>Account balances</li> <li>Reimbursement</li> <li>Other plan details</li> </ul>   | <b>Associated Administrators Inc. (AAI)</b><br>PO Box 3199, Portland OR 97208-3199<br>Phone 1-800-334-4340 ■ 1-800-428-4833 (TTY)<br>Fax 1-800-979-8987<br>Email flex@aai-tpa.com<br>Web www.aai-pca.com   |
| <b>LEOFF 1 Disability Retirement Board</b> <ul style="list-style-type: none"> <li>Disability retirement leave approval</li> <li>Health benefit reimbursement</li> </ul>  | <b>LEOFF 1 Disability Retirement Board Coordinator</b><br>Exchange Building EXC-ES-0300, 821 Second Ave., Seattle WA 98104-1598<br>Phone 206-263-6394 ■ 1-800-325-6165 x31556 (outside local calling area)<br>Fax 206-263-3692<br>Email KCLEOFF1@metrokc.gov<br>Web www.metrokc.gov/finance/kcleoff1   |
| <b>Life Insurance</b> <ul style="list-style-type: none"> <li>Conversion or portability option</li> <li>Evidence of insurability (EOI)</li> <li>For claims, contact Benefits and Retirement Operations</li> </ul>   | <b>Aetna</b><br>Phone 1-800-826-7448 (conversion/portability) ■ 1-800-523-5065 (EOI)   |
| <b>Medical/Vision – General</b> <ul style="list-style-type: none"> <li>Providers (doctors, hospitals, pharmacies, etc.)</li> <li>Claims and appeals</li> <li>Drug formulary (covered drugs)</li> <li>Identification cards</li> <li>Preauthorization/preadmission</li> <li>Other plan details (covered expenses, limits, exclusions)</li> </ul> | <b>Regence BlueShield</b><br>PO Box 21267, 1800 Ninth Ave., Seattle WA 98111<br>Phone 1-800-458-3523<br>Web www.wa.regence.com (e-mail through Web site)<br><br><b>PacifiCare</b><br>PO Box 6092, Cypress CA 90630-0092 ■ PO Box 31053, Laguna Hills CA 92654-1053 (mental health and chemical dependency claims)<br>Phone 1-800-932-3004 (weekdays 7 a.m.-9 p.m. Pacific) ■ 1-800-577-7244 (Behavioral Health) ■ 1-800-292-2336 (Free & Clear® StopSmoking <sup>SM</sup> ) ■ 1-800-762-8456 (emergency care follow-up authorization) ■ 711 TTY Relay Service<br>Web www.pacificare.com (e-mail through Web site)<br><br><b>Cole Vision</b> (for PacifiCare participant vision benefits)<br>PO BOX 8056 Twinsburg OH 44087-8967<br>Phone 1-800-334-7591<br><br><b>Group Health Cooperative</b><br>PO Box 34585, Seattle WA 98124-1585<br>Phone 206-901-4636 ■ 1-888-901-4636 ■ 1-888-457-9516 (out-of-area authorization)<br>Email info@ghc.org<br>Web www.ghc.org |



| For Questions About ...   | Contact ...  |
|---|--|
| Medical – Mail Order Prescriptions  | <p>Postal Prescription Services (Regence BlueShield participants)<br/> Postal Prescription Services<br/> PO Box 2718, Portland OR 97208-2718<br/> Phone 1-800-552-6694<br/> Web <a href="http://www.ppsrx.com">www.ppsrx.com</a> (e-mail through Web site)</p> <p>Walgreens Healthcare Plus (Regence BlueShield participants)<br/> PO Box 188, Beaverton OR 97075<br/> Phone 1-800-797-3345<br/> Web <a href="http://www.walgreenshealth.com/whc/mpharm/jsp/mpharm_cob_home.jsp">www.walgreenshealth.com/whc/mpharm/jsp/mpharm_cob_home.jsp</a> (e-mail through Web site)</p> <p>Prescription Solutions (PacifiCare participants)<br/> PO Box 6037, Cypress CA 90630-0037<br/> Phone 1-800-562-6223 ■ 711 TTY Relay Service<br/> Web <a href="http://www.pacificare.com">www.pacificare.com</a> (e-mail through Web)</p> <p>(Group Health participants use Group Health)</p> |
| Secure Horizons Medicare+Choice Plan for Retirees   | PacifiCare<br>Phone 1-800-829-2925 ext. 7482 ■ 1-800-647-7328 ■ 1-800-387-1074 (TTY)   |
| Washington State Department of Retirement Systems <ul style="list-style-type: none"> <li>• General information</li> <li>• Beneficiary designation</li> <li>• Beneficiary and address changes</li> <li>• Disability benefit options</li> </ul> | Washington State Department of Retirement Systems<br>PO Box 48380, Olympia WA 98504-8380<br>Phone 1-800-547-6657 ■ 360-664-7000 (Olympia area) ■ 360-586-5450 (TTY)<br>Email <a href="mailto:recep@drs.wa.gov">recep@drs.wa.gov</a><br>Web <a href="http://www.drs.wa.gov">www.drs.wa.gov</a>  |
| Workers' Compensation <ul style="list-style-type: none"> <li>• On-the-job illness or injury</li> <li>• Benefits</li> <li>• Claims</li> </ul>  | Safety & Claims Management<br>Boeing Field AIR-HR-0103<br>PO Box 80283, Seattle WA 98108<br>Phone 206-296-0510 ■ 1-800-325-6165 x60510 (outside local calling area)<br>Fax 206-296-0514<br>Intranet <a href="http://ohrm.metrokc.gov/safety/claiminfo/comphome.htm">ohrm.metrokc.gov/safety/claiminfo/comphome.htm</a>   |

